



**COUNTY OF LOS ANGELES  
DEPARTMENT OF AUDITOR-CONTROLLER**

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TO: Supervisor Don Knabe, Chairman  
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FROM: Wendy L. Watanabe   
Auditor-Controller

SUBJECT: **DEPARTMENT OF HEALTH SERVICES HARRIS-RODDE  
SETTLEMENTS – AVERAGE LENGTH OF STAY AND EMERGENCY  
DEPARTMENT BOARDING TIME REVIEW FOR THE QUARTER  
ENDED SEPTEMBER 30, 2008**

At the request of the Department of Health Services (DHS), we reviewed LAC+USC Medical Center's (LAC+USC) compliance with the requirements of the Harris-Rodde lawsuit settlements. Our review indicates that LAC+USC met the settlement requirements for the quarter ended September 30, 2008.

**Background**

In December 2005, the County settled lawsuits with plaintiffs Harris and Rodde regarding reducing the number of beds at the LAC+USC replacement facility to 600 non-psychiatric beds. Under the settlements, LAC+USC was allowed to immediately reduce 25 budgeted, non-psychiatric beds. LAC+USC was also allowed to reduce an additional 35 budgeted, non-psychiatric beds for each quarter LAC+USC reduces the Average Length of Stay (ALOS) by 0.3 days, compared to the previous quarter (from an initial baseline of 6.5 days), and maintains a median Emergency Department Boarding Time (EDBT) under seven hours. The settlement agreements require the Auditor-Controller to verify the ALOS and EDBT when LAC+USC reports that they have met the targets. We previously reported that LAC+USC had accurately reported meeting the ALOS and EDBT requirements for the quarter ended December 31, 2006, the quarters ended March 31, June 30, and December 31, 2007, and the quarters ended March 31,

and June 30, 2008. LAC+USC did not meet the ALOS requirement for the quarter ended September 30, 2007. Our review of EDBT for these quarters was limited to the visits for which LAC+USC had the documentation needed to validate compliance with the EDBT requirements.

County Counsel previously advised us that, once LAC+USC meets the ALOS target of 5.5 days, no further reductions of ALOS are required. However, since LAC+USC has achieved the 600 bed level, the target ALOS has been adjusted to 5.6 days. County Counsel has advised the plaintiffs that LAC+USC will maintain an ALOS of 5.6 days or below and a median EDBT under seven hours through the duration of the settlement agreement which ends on December 31, 2009.

### **Review of Reported ALOS**

ALOS is the average time between when patients are admitted and when they are discharged from the hospital. LAC+USC records both the admission and discharge on the Hospital's Affinity computer system (Affinity). For the quarter ended September 30, 2008, LAC+USC reported an ALOS of 5.4 days.

We reviewed a random statistical sample of 58 records for the quarter ended September 30, 2008 to determine if LAC+USC had accurately reported the ALOS on Affinity. The ALOS reported on Affinity for the 58 records we reviewed was 5.2 days. We noted that the length of stay for one visit (2%) recorded on Affinity was one day. However, the patient's medical record indicated that the patient's total length of stay was two days. This variance did not result in a material change in LAC+USC's reported ALOS. Overall, the ALOS computed for our sample of 58 records for the quarter ended September 30, 2008 was 5.3 days compared to 5.2 days indicated on Affinity.

### **Review of Reported EDBT**

EDBT is the time between when an Emergency Department (ED) physician writes an order for a patient to be placed in an inpatient bed (pre-admit date/time) and when the patient is actually placed in the bed (ED discharge date/time). DHS and County Counsel advised us that, for purposes of verifying the reported EDBT in our prior reviews, the pre-admit date/time should be taken from the pink copy of the Emergency Room (ER) Record (pink sheet). However, beginning December 4, 2007, LAC+USC implemented new procedures to track the EDBT pre-admit date/time on Affinity. When a physician determines that a patient needs an inpatient bed, an on-line, real-time ER Admit Order (Order) is entered into Affinity by authorized ER Staff. Any changes to the original Order result in an updated Order. The date/time of the completion of the original Order will be recorded on Affinity as the pre-admit date/time. These new procedures eliminated the use of the pink sheets to record pre-admit date/time. The ED discharge date/time is verified through a review of the patient's medical record.

For the quarter ended September 30, 2008, LAC+USC reported a median EDBT of 2.93 hours. To ensure that LAC+USC included all visits that are subject to the EDBT requirement, we tested a random statistical sample of 103 visits that were excluded from the median EDBT calculation to determine if the visits were properly excluded (e.g., patients who were not admitted as inpatients, or were admitted from an outpatient clinic should be excluded from the calculation). We noted that all visits in our sample were appropriately excluded from the EDBT calculation.

We reviewed a random statistical sample of 112 visits to verify the EDBT reported on Affinity. We noted that the EDBT for five visits (4%) did not agree to the source documents we reviewed. Specifically:

- For three visits (3%), the source documents we reviewed showed a longer EDBT than was recorded on Affinity. The EDBT on Affinity for these three visits was understated by an average of 0.67 hours.
- For two visits (2%), the source documents we reviewed showed a shorter EDBT than was recorded on Affinity. The EDBT on Affinity for the two visits was overstated by an average of 0.33 hours.

Overall, our sample of 112 visits showed a median EDBT of 2.98 hours, compared to 2.96 hours recorded on Affinity. None of the variances resulted in a material change in the reported median EDBT for the quarter ended September 30, 2008.

DHS and LAC+USC management cooperated during our review and actively participated in the review process. Please call me if you have any questions, or your staff may contact Jim Schneiderman at (213) 253-0101.

WLW:MMO:JLS:MWM

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